| Effective January 1, 2003                                                                                                                                                                                                                                               |                                                |                                           |                |                               |              |                  |        |                     | ) [C                   | <u> </u> | <u> 20</u>            | 1/                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|----------------|-------------------------------|--------------|------------------|--------|---------------------|------------------------|----------|-----------------------|------------------------|
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)                                                                                                                                                                                                                          |                                                |                                           |                |                               |              |                  |        | SMALL EN            | inity                  | OR       | OTHER<br>SMALL        |                        |
| TOTAL CLAIMS                                                                                                                                                                                                                                                            |                                                | 29                                        |                |                               |              | 1                | RATE   | FEE                 |                        | RATE     | FEE                   |                        |
| FOR                                                                                                                                                                                                                                                                     |                                                |                                           | NUMBER FILED   |                               | NUMBER EXTRA |                  | İ      | BASIC FEE           | 375.00                 | OR       | BASIC FEE             | 750.00                 |
| TOTAL CHARGEABLE CLAIMS                                                                                                                                                                                                                                                 |                                                |                                           | ·24 minus 20=  |                               | • 9          |                  | İ      | X\$ 9=              |                        | OR       | X\$18=                | 162                    |
| INDEPENDENT CLAIMS                                                                                                                                                                                                                                                      |                                                |                                           | Ų minus 3 =    |                               |              |                  |        | X42=                |                        | OR       | X84=                  | .84                    |
| 'MU                                                                                                                                                                                                                                                                     | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | resent         |                               |              |                  |        | +140=               |                        | OR       | +280=                 |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                                                                                                                                                                                |                                                |                                           |                |                               |              |                  |        | TOTAL               |                        | OR       | TOTAL                 |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                            |                                                |                                           |                |                               |              |                  |        | SMALL               | ENTITY                 | OR       | OTHER<br>SMALL        |                        |
| AMENDMENT A                                                                                                                                                                                                                                                             |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER          | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE .                | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                         | Total                                          | . 22                                      | Minus          | 1.0                           | 9            | =                |        | X\$ 9=              | /                      | OR       | X\$18=                |                        |
|                                                                                                                                                                                                                                                                         | Independent                                    | . 2                                       | Minus          |                               | 7            | =                |        | X48=                |                        | OR       | _X84=                 |                        |
| ⋖                                                                                                                                                                                                                                                                       | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DE     | PENDEN                        | CLAIR        |                  |        |                     | <b>-</b>               |          |                       |                        |
| +140=                                                                                                                                                                                                                                                                   |                                                |                                           |                |                               |              |                  |        |                     |                        | OR       | +280=                 |                        |
| 7/24/0 (Column 1) (Column 2) (Column 3)                                                                                                                                                                                                                                 |                                                |                                           |                |                               |              |                  |        | TOTAL<br>ADDIT, FEE |                        | OR       | ADDIT, FEE            |                        |
| AMENDMENT 8                                                                                                                                                                                                                                                             |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER          | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |          | PARE                  | ADDI-<br>TIONAL<br>FEE |
|                                                                                                                                                                                                                                                                         | Total                                          | .22                                       | Minus          | -6                            | 79           | = B              |        | X\$ 9=              |                        | OR       | X\$18=                | K ·                    |
|                                                                                                                                                                                                                                                                         | Independent                                    | . 3                                       | Minus          |                               | <u>Z</u>     | =//              |        | X42=                |                        | OR       | X84=                  |                        |
| <del>-</del>                                                                                                                                                                                                                                                            | FIRST PRESE                                    | ENTATION OF ME                            | ULTIPLE DE     | PENDENI                       | CLAIN        |                  | '      | +140=               |                        | OR       | <b>1</b> 280=         |                        |
|                                                                                                                                                                                                                                                                         | •                                              |                                           |                | -1                            |              |                  |        | TOTAL<br>ADDIT. FEE |                        | OR       | TOTAL<br>ADDIT. FEE   |                        |
|                                                                                                                                                                                                                                                                         |                                                | (Column 1)                                |                | (Colui                        |              | (Column 3)       |        |                     |                        |          |                       |                        |
| AMENOMENT.C                                                                                                                                                                                                                                                             |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER          | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |          | RATE                  | ADDI-<br>TIONAL<br>FEE |
| Š                                                                                                                                                                                                                                                                       | Total                                          | •                                         | Minus .        | **                            |              | 44               |        | X\$ 9=              |                        | OR       | X\$18=                |                        |
| ME                                                                                                                                                                                                                                                                      | Independent                                    | •                                         | Minus          | 999                           | i net        | 8                | 1      | X42=                | •                      |          | X84=                  |                        |
| ۹_                                                                                                                                                                                                                                                                      | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                |                               |              |                  |        | 7455                |                        | OR       |                       |                        |
| •                                                                                                                                                                                                                                                                       | if the entry in colu                           | imo 1 is less than ti                     | he entry in co | tumn 2. writi                 | Oʻta c       | ofuma 3.         |        | +140=               |                        | OR       | +280=                 |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT, FEE  "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                                                |                                           |                |                               |              |                  |        |                     |                        | OR       | , TOTAL<br>ADDIT, FEE |                        |
|                                                                                                                                                                                                                                                                         |                                                | nber Previously Pa                        |                |                               |              |                  | er fou | ind in the app      | propriate bo           | x in co  | iuma 1.               |                        |

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number